

BREMERTON FIRE DEPARTMENT
817 PACIFIC AVENUE • BREMERTON, WA 98337
(360) 478-5380 • FAX (360) 478-7257

COMPLAINT FORM

Date Received: 9/28/00 Complaint Number: _____
Location of Violation: Sesko Pennsylvania Tax Acct. #: _____
Owner's Name: _____
Owner's Address: _____
City, State, Zip: _____

NATURE OF VIOLATION

Drinking Boats?

Violation can be seen from:

☐ City Street or Alley

☐ Complainant's property (must give written permission to enter property to inspect)

Signature

Date

Complainants may remain anonymous if we do not need to enter their property to see the violation. However, for the purpose of aiding the investigation of this complaint, the complainant's name and phone number will be helpful.

Complainant's Name: Wayne Olsen Phone #: _____
Street Address: _____ City, State, Zip: _____

ACTION TAKEN
To Be Completed by City

Inspected by: _____ Date: _____

SECTION OF CODE VIOLATED

RECOMMENDED ACTION